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.... **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For th	e 2008 c	alendar	/ear, or tax year beginni:	ng 7/1/2008	, and end	ding 6/30	0/2009		
		applicable	Please use IRS	C Name of organization Li	nn-Mar School	Foundati	.on			oyer identification numl
\sqcup	Address	change	label or	Doing Business As						267125
	Name c	hange	print or type.	Number and street (or PO box		reet address)	Room/suite			hone number
	Initial re	turn	See	3111 N. 10th St.					319-	-447-3065
	Termina		Specific Instruc-	City or town, state or count	try, and ZIP + 4					
	Amende	ed return	tions.	Marion	IA	52302			G Gross	recepts \$ 239
	Application	on pending	F Nar	e and address of principal off Frantz	icer·			H(a) İşthıs	a մային ագո	m for affiliates? Yes
			3111	N 10th St	Marion	IA	52302	H(b) Are a	all affiliates	included? XYes
<u></u>		empt status		01(c) (3) ◄ (insert no)	34947(a)(1) or 52	27		If "N	o," attach	a list (see instructions)
				foundation.org				H(c) Group e	exemption n	umber ▶
K	Type of	organization	Corpc	ation 🔲 Trust 🔲 Association [☐ Other ►	L Year	of formation.	1985	M State	of legal domicile. IA
Pa	art I	Summ	nary							
	1	Briefly de	escribe	the organization's missi	on or most signific	ant activities	•			
				r School Foundat						
Activities & Governance				chool District's						
E.				ar experience fo						
ě	1 '			If the organization discor				04 of its or		
ဋ္ဌ	1			-	•	•			1 2	17
ර				members of the gove		•				+
Ē	1			endent voting member	•					17
Ž	1			employees (Part V, line					. 5	
¥				volunteers (estimate if					. 6	47
				ated business revenue					. 7a	0
	b	Net unre	lated b	siness taxable income	from Form 990-T, I	ine 34			<u>. 7b</u>	0
								Prior Ye	ar	Current Year
ø.	8	Contribu	tions a	d grants (Part VIII, line	1h)			3381	L49	288157
Revenue				revenue (Part VIII, line			I		0	0
9Ae	1	_		ne (Part VIII, column (A	•		I	-422	202	-117796
œ				art VIII, column (A), line				588	327	41917
	12	Total reve	enue—a	Blines 8 thidude 11 (mi	ust equal Part VIII. co	olumn (A). line	12)	3547	774	212278
										157980
}	1	Grand and Entire and Spare (1 art 189 polaritir (4), mics 1 b)								0
Expenses	14	Calarias	Parito	MAR 2 6 20 m	Sociumii (A), line 4	t) (A) (: 5	: . · 	498		54288
Š	15	Salaries,	otnen co	mpensation, employee b	enerits (Part IX, colur	mn (A), lines 5	-10) <u> </u>	236	•	
ğ	16a	Profession	onal tu <u>n</u>	Iraising fees (Part IX, col	a±mnn (A), line 11e)	120	32.	230	004	3053
Exp	b	Total fun	draising	expenses (Nart IX, column (A), lin	ın (D), line 25) ▶			279	117	
	17	Other ex	penses	(Part TX, column TA), lin	es-11a-11d, 11f-24	₩	· · -			13523
	18	Total exp	enses.	Add lines 13-17 (must	equal Part IX, colur	mn (A), line 2	25)	3310		228844
s or	19	Revenue	less ex	enses. Subtract line 18 t	from line 12			237	58	-16566
Sor								Beginning o		End of Year
Assets Balanc	20	Total ass	sets (Pa	t X, line 16)				5229	910	499231
et Assets nd Balanc	21			art X, line 26)					721	0
Net A	22	Net asse	ts or fu	nd balances. Subtract li	ine 21 from line 20			5221	L89	499231
Pa	art II	Sign	ature	Block						
		Under pe	enalties of	perjury, I declare that I have ex	xamined this return, inclu-	ding accompany	ing schedules	and statem	ents, and	to the best of my knowled
		and belie	ef, it is tru	, correct, and complete Decl	aration of preparer (othe	r than officer) is	based on all	ınformatıon	of which p	preparer has any knowled
Sig	ın	_ <		\leq	•		•	3	1221	O
He	-	Sign	ature of	ficer				Date	9	
		-	54	+ Whlir. Tree	ne					
		Type	or nant	iame and title	RSUPER			-	•	
		Date Chark if					D			
		Preparer' signature				Date	setf-		Preparer's (see instru	identifying number ctions)
Paid	j	a signature	• •			İ	emplo	yed ▶ ∐		•
Pre	parer's	l		-				_,		
	Only	Firm's na		ırs				EIN	>	
	<u>-</u>	address,		4				Phone no	→	
Ma	y the	IRS disc	uss this	return with the prepare	er shown above? (s	ee instruction	ns)			. Yes
							,	<u> </u>		

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Page	2

Par	t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission:
•	
	The Linn-Mar School Foundation raises and distributes funds in
	support of the District's mission to provide exemplary educational
	and co-curricular experience for students in grades K - 12
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$13000_ including grants of \$13000_) (Revenue \$0)
	The Linn-Mar School Foundation distributes scholarships to students
	meeting established criteria in the areas of achievement and stated
	educational goals.
	······································
4b	(Code:) (Expenses \$ 144980 including grants of \$ 144980) (Revenue \$ 0)
	The Linn-Mar School Foundation raises and distributes funds in support
	of the Linn-Mar Community School District's mission to provide exemplary
	educational and co-curricular experience for students in grades K-12
4c	(Code:) (Expenses \$0 including grants of \$0)
	•••••••••••••••••••••••••••••••••••••••
4d	Other program services. (Describe in Schedule O.)
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ▶ \$ 157980 (Must equal Part IX, Line 25, column (B).)

Pai	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1_1_	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	 6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		<u>x</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		x
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to question 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		х
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	person from a prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x

Pai	t IV Checklist of Required Schedules (continued)		_	_
		لــــا	Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		х
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	,	х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		х.
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns, Enter -0- if not applicable			
h	U.S. Information Returns. Enter -0- if not applicable			
	Little the humber of Forms weed included in the Fa. Little -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
L	Statements, filed for the calendar year ending with or within the year covered by this return	2b	х	J
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20	<u> </u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	20	 	x
h	this return?	3a 3b		
		55		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		х
	required to file Form 8282?	10		
	Tres, include the full both of the both of			
C	benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		x
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from members or shareholders			
IJ	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 0			7

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
	-		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			_
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
_	Enter the name of training members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
_	any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		x
_	supervision of officers, directors or trustees, or key employees to a management company or other person?	_3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
7a		_		
	of the governing body?	7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Х
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	х	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	х	
	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O. (see instructions)			
16a				_
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			Х
h	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		
	with a taxable entity during the year?	16a		
	with a taxable entity during the year?	16a		Λ
	with a taxable entity during the year?	16a		Α
	with a taxable entity during the year?			
	with a taxable entity during the year?	16b		
Sec	with a taxable entity during the year?	16b		
Sec 17	with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)	16b		
Sec 17	with a taxable entity during the year?	16b		
Sec 17 18	with a taxable entity during the year?	16b	only)	
Sec 17	with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website I Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict.	16b	only)	
Sec 17 18	with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict policy, and financial statements available to the public.	16b	only) erest	
Sec 17 18	with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website I Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict.	16b	only) erest	

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

☐ Check this box if the organization did not co		any o	offic			ctor,	trus			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	P or director	nstitutional trustee	Officer	ম Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Annette Perry, Executive Directo									_	
Tina Patterson, Executive Direct	40	X .,						12000	0	0
Karin Frantz, Operations Manager	30	X			x	х		12000 26040	0	0
Jon Bancks	0	х						0	0	0
Shannon Bruns	0	х						0	0	0
Bob Carlson	0	x		-				0	0	0
Chris Frantz	0	х		х				0	0	0
Neil Havlik	0	Х		x				0	0	0
Phil Hershner	0	х						0	0	0
Tim Larson	0	х						0	0	0
Joan McVay	0	х						0	0	0
Sara Mentzer	0	х		x				0	0	0
Mary Rankin		х						0	0	0
Leah Rodenberg	0	x		x				0	0	0
Teddi Smith		X						0	0	0
Jeff Standerski	0	X								0
Rob Sturenfeldt	0	X						0	0	0

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Part VII S	ection A. Officers, Directors, Tru	rustees, Key Employees, and Highest							Compensate	i Employees (d	es (continued)		
_	(A)				(6	C)			(D)	(E)		(F)	
	Name and title		ndividual trustee	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the corganization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	con () (organ	stimated mount of other inpensation from the ganization of related janizations	
Scott Uhlin	-	0	х		X				0	0		0	
Amy Westfal	1	0	X						ō	Ō		0	
Wendy Young		. 0	х		Х				0	0		0	
				_		_							
1b Total		<u> </u>	<u> </u>	<u> </u>	l	I			49707		0	0	
2 Total numborganization	oer of individuals (including thos on ► 0	e in 1a) wh	no rec	eive	ed r	nore	e thar	n \$1	00,000 in repo	rtable comper	sation	from the	
	ganization list any former office on line 1a? <i>If "Yes," complete</i> S							oyee	e, or highest o	ompensated	3	х	
the organi	dividual listed on line 1a, is the station and related organizations										4	x	
individual. 5 Did any p	erson listed on line 1a receive endered to the organization? If "	or accrue	 comp	pen: Sch	sati	on i	from <i>I for</i> s	 any	unrelated org	anization for	5	x	
	lependent Contractors	100, 00///	<u> </u>				, 10, 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	percerr : .				
1 Complete	this table for your five highest c tion from the organization.	ompensate	d ind	ере	nde	ent d	contra	acto	rs that receive	d more than \$	100,00) of	
	(A) Name and business add	dress							(B) Description of s	ervices	(Compe	C) ensation	
None												0	
			_					┢					
						_	_						
2 Total num compensa	ber of independent contractors	(ıncluding	those		1) v	vho	recei	ved	more than \$1	00,000 in			

Form 9	•	<u>'</u>							Page 9
Part	VIII	Statement of Re	venue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under-sections 512, 513, or 514
nts nts	1a	Federated campaigns		1a	9002		į		
gra	ь	Membership dues		1b	0				
S, arr	С	Fundraising events	L	1c	0				
Contributions, gifts, grants and other similar amounts		Related organizations	L	1d	0		İ		
Ë,š		Government grants (contri	ibutions)	1e	0	i			
tior sr s		All other contributions, gifts, g	· 1			İ			
it it	-	and similar amounts not inclu	ded above	1f	279155				
d tr	ا و	Noncash contributions include	ed in lines 12.	-1f \$	0				
g g	h	Total. Add lines 1a-1f			•	288157			
<u> </u>					Business Code				
en.	2a			Ī		0	0	0	0
æ	ь			1		0	0	0	0
9	ے ا					0	0	0	0
ē	ă					O	0	0	0
E	۾ ا					0	o	0	0
Program Service Revenue	f	All other program servi				0	0	0	C
Pro	g	Total. Add lines 2a-2f		'	🕨	0			
	3	Investment income (incother similar amounts)	luding div	ridends	, interest, and	-117796	-117796	0	0
	4	Income from investment of				0	0	0	0
	5	Royalties			•	0	0	0	C
			(i) Real		(iı) Personal				
	6a	Gross Rents		0	0		[-
		Less: rental expenses		0	0				
		Rental income or (loss)		0	0				
	d	Net rental income or (lo	oss)		🕨	0	0	0	0
	72	Gross amount from sales of	(i) Securit		(ii) Other				
	١,٠	assets other than inventory		0	0				•
	ь	Less: cost or other basis							
		and sales expenses .		0	0				
	С	Gain or (loss)		0	0				
	d	Net gain or (loss)			<u></u>	0	0	0	0
Other Revenue		Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line	. <u>.0</u> 1c). · a	62850				
Ę	b	Less: direct expenses		. b	27216	35634	35634	0	0
O		Net income or (loss) from		_	vents >	33034	33034		
	9a	Gross income from gam	ning activit	ies.	6748				
		See Part IV, line 19		. a	482				
	С	Less: direct expenses, Net income or (loss) fro	om gaming	g activi		6266	6266	0	0
		Gross sales of inverteurns and allowances		. а	0				
		Less. cost of goods so			0	0	0	0	0
	<u> </u>	Net income or (loss) from Miscellaneous Rev		Invento	. •		<u>-</u>		0
		2.3			Business Code	17	1.7	0	0
	11a					0	17	0	0
	b					0	- 0	0	0
	C					0	0	- 0	- 0
	1	All other revenue			L	17			
	1	Total. Add lines 11a-1				1 /			
	12	Total Revenue. Add lings, 10c, and 11e	nes 1h, 2g	g, 3, 4,	5, 6d, 7d, 8c, ▶	212278	-75879	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B) (C) and (D)

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	144980	144980						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	13000	13000						
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	Q	<u></u>		.3				
4	Benefits paid to or for members	0	0						
5	Compensation of current officers, directors, trustees, and key employees	49707	0	49707					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0				
7	Other salaries and wages	0	0	0	0				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0				
9	Other employee benefits	0	0	0	0				
10	Payroll taxes	4581	0	4581	0				
11	Fees for services (non-employees):								
а	Management	0	0	0	0				
b	Legal	0	0	0	0				
С	Accounting	537	0	537	0				
	Lobbying	0	0	0	0				
е	Professional fundraising services See Part IV, line 17	3053			3053				
f	Investment management fees	0	0	0	0				
g	Other		0	0	0				
12	Advertising and promotion	7477	0	. 0	7477				
13	Office expenses	4352	0	2850	1502				
14	Information technology	174	0	174	0				
15	Royalties	0	0	0	<u> </u>				
16	Occupancy	0	0	0	0				
17	Travel	0	0	0	0				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0_				
19	Conferences, conventions, and meetings .	0	0	0	0				
20	Interest	0	0	0	<u> </u>				
21	Payments to affiliates	0	o	0	0				
22	Depreciation, depletion, and amortization.	0	0	0	0				
23	Insurance	983	0	983	0				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)								
а	•	0	0	0	0				
b		0	0	0	0				
С	•••••	0	0	0	0				
d		0	. 0	0	0				
e		0		0	0				
f	All other expenses	0	0	0	0				
25	Total functional expenses. Add lines 1 through 24f	228844	157980	58832	12032				
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	0	0	0	0				

Page **11**

Pa	rt X	Balance Sheet					
			(A) Beginning of year		(E End o	3) of year	
	1	Cash—non-interest-bearing	49469	1		1047	05
	2	Savings and temporary cash investments	473441	2		3944	<u>35</u>
	3	Pledges and grants receivable, net	0				0
	4	Accounts receivable, net	0	4			0
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.	0	5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	6				
ģ	7	Notes and loans receivable, net		7			0
Assets	8	Inventories for sale or use	0				
As	9	Prepaid expenses and deferred charges	0				91
	10a	Land, buildings, and equipment: cost basis 10a 0			•		
		Less: accumulated depreciation. Complete					
		Part VI of Schedule D	0	10c			(
	11	Investments—publicly traded securities	0	11			С
	12	Investments—other securities. See Part IV, line 11	0	12			C
	13	Investments—program-related. See Part IV, line 11		13			0
	14	Intangible assets	0	14			C
	15	Other assets See Part IV line 11	O	15			0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	522910			4992	31
	17	Accounts payable and accrued expenses					
1	18	Grants payable		18			(
	19	Deferred revenue		19			0
	20	Tax-exempt bond liabilities		20			
ies	21	Escrow account liability. Complete Part IV of Schedule D	0	21			_0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
		persons. Complete Part II of Schedule L	0				_
	23	Secured mortgages and notes payable to unrelated third parties	0				(
	24	Unsecured notes and loans payable	0				(
	25 26	Other liabilities. Complete Part X of Schedule D		1 +			
	20	Total liabilities. Add lines 17 through 25	721	26			C
ances	0-	complete lines 27 through 29, and lines 33 and 34.	84389	27		1047	06
ala	27	Unrestricted net assets	75998			527	
- T	28 29	Temporarily restricted net assets	361802			3416	
r Fund Bala	29	Permanently restricted net assets		23			
S	30	· -	C	30			
Net Assets or	31	Capital stock or trust principal, or current funds	0				0
As	32	Retained earnings, endowment, accumulated income, or other funds	0				
<u>e</u>	33	Total net assets or fund balances	522189			4992	
Z	34	Total liabilities and net assets/fund balances	522910	34		4992	
Pa	rt XI						
			☐ Other			Yes N	do
1		ounting method used to prepare the Form 990: $oxtimes$ Cash $oxtimes$ Accrual re the organization's financial statements compiled or reviewed by an $oxtimes$ nd		+2	2a	×	
2a h		e the organization's financial statements complied or reviewed by an independent according to the complex control of the contr			2b	x	_
		e the organization's linaridal statements addited by an independent accides to lines 2a or 2b, does the organization have a committee that assumes		 sight of			
C		audit, review, or compilation of its financial statements and selection of an in		-	I		
3 a	Asa	a result of a federal award, was the organization required to undergo and Single Audit Act and OMB Circular A-133?	audit or audits as set	t forth i	in	x	_
b		'es," did the organization undergo the required audit or audits?				 	<u> </u>

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Linn-Mar School Foundation

Employer identification number

42-1267125

									42-12	0/125		
Pa	rt I	Reason	for Public Ch	narity Status (All or	ganızatio	ons mus	t compl	ete this	part.) (se	e instru	ctions)	
The	orga	inization is n	ot a private four	dation because it is:	(Please o	check onl	y one or	ganizatio	n.)			
1				rches, or association	•		-	-	•	A)(i).		
2	$\bar{\Box}$			on 170(b)(1)(A)(ii). (Att					()(-)(-	417.		
3	$\overline{\Box}$			nospital service organ		•	in sectio	n 170(h)	/4\/A\/iii\	(Δttach S	Schodulo H \	
4	=		·	tion operated in con						-	•	+ha
7	ш		-	ate:			•			ייאנטאני	MeXini. Enter	11.6
_	$\overline{}$											
5			tion operated for (b)(1)(A)(iv). (Coi	the benefit of a colle mplete Part II.)	ge or uni	versity ov	wned or d	operated	by a gov	ernmenta	l unit describe	d in
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in sect	ion 170(l	b)(1)(A)(v)			
7				/ receives a substantia (1)(A)(vi). (Complete P		its suppo	ort from a	governn	nental uni	t or from	the general pu	blic
8	X		• •	in section 170(b)(1)	•	Complete	Part II.)					
9	$\overline{\Box}$			receives: (1) more that				m contrib	utions m	embersh	in fees, and or	กรร
•		_		ed to its exempt funct							•	
				ent income and unre		-		•				
			-	after June 30, 1975.				•			, Buomice	-
40	\Box	-	•						•	-141 /		
10	\vdash			nd operated exclusive	-		_				•	
11	Ш	-	•	and operated exclusiv	•					•		
				blicly supported organ								ion
				at describes the type					-	_	. •	
	_	a 🗌 Type		• •			ctionally	•			Type III–Othe	
е				tify that the organizat								
		-		n managers and other	r than on	e or more	publicly	supporte	ed organiz	ations de	escribed in sec	tion
		509(a)(1) or :	section 509(a)(2)	•								
f		If the organi	ization received	a written determinati	on from	the IRS	that it is	a Type	I, Type II.	or Type	III supporting	l
		_	, check this box									П
g		Since Augus	t 17, 2006, has	the organization acce	epted any	aift or c	ontribution	on from a	inv of the			
Ū		following pe		J	,,	3			,			
				r indirectly controls, e	other alo	ne or too	ether wit	h nersor	s describ	ned in (ii)	Yes	No
			-	ning body of the supp		_		iii poroor	10 0000112	, , , , , , , , , , , , , , , , , , ,	11g(i)	
		= =	-	rson described in (i) a		•					11g(ii)	_
				of a person described							11g(iii)	—
h			•	ation about the organ				upporte			[1.8(1.1)]	—
							1					
(1)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify nization in	organizat	s the son in col	(vii) Amount of support	i
				above or IRC section		document?		of your		zed in the	оаррол	
				(see instructions))			sup	oort?	U	S ?		
					Yes	No	Yes	No	Yes	No		
												0
									<u> </u>			
		-					1					_
							[
												—
						 		 				

Total

0

Sche	dule A (Form 990 or 990-EZ) 2008						Page 2
Pa	Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)						
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	188284	206966	255926	338149	288157	1277482
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	q	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	q	0	0	0
4	Total. Add lines 1-3	188284	206966	255926	338149	288157	1277482
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						82700
_	shown on line 11, column (f)				:		
6	Public support. Subtract line 5 from line 4.	<u> </u>	I				1194782
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
		188284	206966	255926	338149	288157	1277482
7 8	Amounts from line 4	30993	26499	55575	-42202	-117796	-46931
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	921	360	311	22	17	1631
11	Total support. Add lines 7 through 10 .	l				l	1232182
12	Gross receipts from related activities, etc	•				12	368112
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	re	<u> </u>			ear as a sectio	
14	Public support percentage for 2008 (line			column (6)		14 96.96	%
	Public support percentage from 2007 Schedule A, Part IV-A, line 26f						
b	33% % support test—2007. If the organization qua						_
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum meets the "facts-and-circum"	acts-and-circun	nstances" test, (check this box a	and stop here.	Explain in Part	IV how the
18	10%-facts-and-circumstances test – 2007 more, and if the organization meets the "facts-and-circumstance organization meets the facts-and-circumstance organization did not be a second organization of the org	acts-and-circum inces" test. The	stances" test, c organization qua	heck this box a lifies as a public	nd stop here . ly supported org	Explain in Part ganization	IV how the

42-1267125 Schedule A (Form 990 or 990-EZ) 2008 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (c) 2006 (d) 2007 (b) 2005 (e) 2008 (f) Total grants. contributions. membership fees received. (Do not include 0 0 0 any "unusual grants.") 0 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 0 0 0 0 organization's tax-exempt purpose . . . Gross receipts from activities that are not an 0 0 0 0 unrelated trade or business under section 513 0 0 Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 its behalf 0 The value of services or facilities furnished by a governmental unit to the 0 n 0 C 0 organization without charge . . . 0 0 0 0 0 0 Total. Add lines 1-5 7a Amounts included on lines 1, 2, and 3 0 0 0 0 0 0 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 0 c Add lines 7a and 7b 0 Public support (Subtract line 7c from line 6.) 0 Section B. Total Support 1

C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	C
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	. 0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	0	0	0	0	0	C
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	. 0	_0	C
13	Total support. (Add lines 9, 10c, 11, and 12.)						0

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)

Section C. Computation of Public Support Percentage							
15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)	15	0.0	%			
16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16		%			
Sec	ction D. Computation of Investment Income Percentage		-				
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) .	17	0.0	%			
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18		%			

- 19a 331/3 % support tests 2008. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line 17 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization \blacktriangleright
 - 331/3 % support tests 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and line 18 is not more than 33%%, check this box and stop here. The organization qualifies as a publicly supported organization
- Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions >

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Nam	e of the organization	Employer identification number				
Lin	n-Mar School Foundation	42-1267125				
Pa	Organizations Maintaining Donor Advised Funds or Other Similar F the organization answered "Yes" to Form 990, Part IV, line 6.	Funds or Accounts. Complete if				
	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year0					
2	Aggregate contributions to (during year)	0				
3	Aggregate grants from (during year) 0	0				
4	Aggregate value at end of year	0				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?					
6	Did the organization inform all grantees, donors, and donor advisors in writing that grused only for charitable purposes and not for the benefit of the donor or donor advisor impermissible private benefit?	or or other				
Da	rt II Conservation Easements. Complete if the organization answered "Yes" t	Yes No				
		to Form 990, Part IV, line 7.				
2	☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of certified historic structure ☐ Preservation of open space					
		Held at the End of the Year				
а	Total number of conservation easements	2a				
b	Total acreage restricted by conservation easements	1 1				
С	Number of conservation easements on a certified historic structure included in (a) .	1 - 1				
d	Number of conservation easements included in (c) acquired after 8/17/06	1 1				
3	Number of conservation easements modified, transferred, released, extinguished, or to the taxable year ▶	erminated by the organization during				
4	Number of states where property subject to conservation easement is located ▶					
5	Does the organization have a written policy regarding the periodic monitoring, inspect enforcement of the conservation easements it holds?					
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements	during the year ▶				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements duri	ing the year▶ \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirement 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes 🗌 No				
9	In Part XIV, describe how the organization reports conservation easements in its reveloblance sheet, and include, if applicable, the text of the footnote to the organization's the organization's accounting for conservation easements.					
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Other Similar Assets.				
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue art, historical treasures, or other similar assets held for public exhibition, education, or reprovide, in Part XIV, the text of the footnote to its financial statements that describes	esearch in furtherance of public service,				
b	If the organization elected, as permitted under SFAS 116, to report in its revenue state historical treasures, or other similar assets held for public exhibition, education, or resprovide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	search in furtherance of public service,				
2 a b	If the organization received or held works of art, historical treasures, or other similar following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1	• \$				

Schedule D (Form 990) 2008 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition а Loan or exchange programs Scholarly research Other Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not J Yes ∐ No b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c c Beginning balance . . . d Additions during the year . . . 1d <u>1e</u> Distributions during the year . Ending balance 1f Did the organization include an amount on Form 990, Part X, line 21? Yes **b** If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 437800 1a Beginning of year balance . . . **b** Contributions 93520 c Investment earnings or losses . -108295 d Grants or scholarships . 11659 Other expenditures for facilities and programs 16931 Administrative expenses . . . g End of year balance 394435 Provide the estimated percentage of the year end balance held as. Board designated or quasi-endowment ▶ 0.0 % Permanent endowment ▶87.0 % Term endowment ▶ 13.0 % 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: 3a(i) X (i) unrelated organizations (ii) related organizations 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIV the intended uses of the organization's endowment funds. Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI (a) Cost or other basis (d) Book value (b) Cost or other (c) Depreciation (investment) basis (other) **1a** Land . . . **b** Buildings c Leasehold improvements e Other Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2008		Page \$
Part VII Investments - Other Securities	s. See Form 990, Part X,	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-neid equity interests		
Other		
		
	 -	
	-	·····
	•	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)	0	
Part VIII Investments - Program Relate	d. See Form 990, Part X,	line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	-	
	+ -	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)	0	
Part IX Other Assets. See Form 990, Part IX		
	(a) Description	(b) Book value
		
	· · · · · · · · · · · · · · · · · · ·	
Total (Caluma (b) about to a d Farm 2000 Part V	1.601.451	
Total. (Column (b) should equal Form 990, Part X, co Part X Other Liabilities. See Form 990,	Dort V. line 25.	· · · · · · · · · · · · · · · · · · ·
(a) Description of liability	[
Federal income taxes	(b) Amount	
Todala modino taxoo		†
		
		_
		_[
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25) ▶	0	

scne	dule D (Form 990) 2008		_ Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	0
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	0
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	. 0
4	Net unrealized gains (losses) on investments	4	<u> </u>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4–8	9	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	0
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	e per Retu	
1	Total revenue, gains, and other support per audited financial statements	11	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments		
b	Donated services and use of facilities	⊣	
C	Recoveries of prior year grants	7	
d	Other (Describe in Part XIV)	7	
e		2e	0
		3	0
3	Subtract line 2e from line 1	•	
4		1 1	
a	investment expenses not included on torm 550, that vin, line 75	-	
b	Other (Describe in Part XIV)	4c	0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		0
_	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
		1	, cui ii
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a		
a	bolidied solviess and use of identities	-	
þ	Thor year adjustments	-	
C	Losses reported or Form 330, Fart IX, line 23	- ∤	
d	Other (Besselled III at 2017)	2e	0
е	Add lines 2a through 2d	3	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-	
b	Other (Describe in Part XIV)	1	
_C		4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	0
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4; Part I\	/, lines 1b
and	2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.		
_			
Par	t V, line 4: To earn income to be invested back into educational p	programs.	
-			

SCHEDULE 1 (Form 990)

Internal Revenue Service

Department of the Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No 1545-0047 2008

Complete if the organization answered "Yes," on Form 990, Part IV, lines 2, for any recipient who received more than \$5,000.

Open to Public

ŝ (h) Purpose of grant or assistance Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use **Employer identification number** Yes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" × Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 42-1267125 (g) Description of ron-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash 0 assistance (c) IRC Code section (d) Amount of cash grant 144980 Enter total number of 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? if applicable Part I General Information on Grants and Assistance Schedule I-1 if additional space is needed (**b**) EIN Enter total number of other organizations Foundation Scho 1 (a) Name and address of organization Mar Community or government Linn-Mar School Name of the organization Linn

Schedule I (Form 990) 2008

Cat No 50055P

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 0 (c) Amount of cash grant 13000 (b) Number of recipients 21 (a) Type of grant or assistance Schedule I (Form 990) 2008 Scholarships Part III

Schedule I (Form 990) 2008

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, Department of the Treasury Internal Revenue Service 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. Inspection Name of the organization Employer identification number Linn-Mar School Foundation 42~1267125 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations Solicitation of non-government grants Solicitation of government grants **Email solicitations** g X Special fundraising events Phone solicitations d X In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. (vi) Amount paid to (or retained by) (iii) Did fundraiser have custody or control of contributions? (v) Amount paid to (or retained by) fundraiser listed in (i) Name of individual (ii) Activity (iv) Gross receipts or entity (fundraiser) from activity organization col (ii) Yes No 0 0 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2008

		more than \$15,000 on F	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total	Cuarte	
			Auction	Golf Outing	0	(a) lotal (Add col (a		h
			(event type)	(event type)	(total number)	col (
ine								
Revenue	1	Gross receipts	46824	16026	0		6	2850
æ	2	Less: Charitable			0			
	3	contributions	0	0	U	_		0
	3	minus line 2)	46824	16026	0		6	2850
					-			
	4	Cash prizes	1000	57	0			1057
es	5	Non-cash prizes	0	40	0			40
Direct Expenses		Non-cash phizes	- V	10		<u> </u>		40
ᄍ	6	Rent/facility costs	400	4880	0			5280
ect	_	Other Perstance	17145	3604	0		2	0020
څ	7	Other direct expenses	17145	3694				0839
	8	Direct expense summary. Ad	ld lines 4 through 7 in co			(272	216)
	9	Net income summary. Comb					356	534
Рa	rt II	Gaming. Complete if than \$15,000 on Form	the organization answ	vered "Yes" to Form	990, Part IV, line 19,	or reporte	ed mo	re
		than \$15,000 on Form	· · · · · · · · · · · · · · · · · · ·					
nne			(a) Bingo (b) Pull tabs/instant (c) Other gaming bingo/progressive bingo		(c) Other gaming	(d) Total gaming (Ad col (a) through col		
Revenue								
<u> </u>	1	Gross revenue	0	0	0			(
					_			
Se	2	Cash prizes	0	0	0			
xpe	3	Non-cash prizes	0	0	0			(
当に		, , , , , , , , , , , , , , , , , , ,			1. <u>-</u>			-
Direct Expenses	4	Rent/facility costs	0	0	0			
_	5	Other direct expenses .	0	0	0			(
			☐ Yes %	☐ Yes %	☐ Yes %			
	6	Volunteer labor	☐ No	☐ No	☐ No			
	_	_				,		
	7	Direct expense summary. Ad	ld lines 2 through 5 in co	olumn (d)		1		0)
	8	Net gaming income summary	y. Combine lines 1 and 1	7 in column (d)				0
		-			. <u>.</u>		Yes	No
9		ter the state(s) in which the o					ļ	ļ
а		the organization licensed to o	perate gaming activities	s in each of these state	es?	. <u>9a</u>		
b	If "	'No," Explain:						
							1	
10a	We	ere any of the organization's of	aamıng licenses revoke	d. suspended or termin	ated during the tax vea	ar? 10a	1	
		Yes," Explain:	J.:g	_,	and the year			
					••		-	
1 2		es the organization operate g the organization a grantor, be			a nartnership or other	entity 11	+	
_	for	med to administer charitable	gaming?	trust of a member of		. 12	 	<u> </u>

Sched	tule G (Form 990 or 990-EZ) 2008				Р	age 3
					Yes	No
13	Indicate the percentage of gaming activity operated in:					
а		13a	%			
b	An outside facility	13b		ļ.,		
14	Provide the name and address of the person who prepares the organization's gaming, and records:	/speci	al events books	i i		i
	Name ▶					
	Address ▶					
15a	Does the organization have a contract with a third party from whom the organization revenue?			15a		
b	If "Yes," enter the amount of gaming revenue received by the organization \blacktriangleright \$ amount of gaming revenue retained by the third party \blacktriangleright \$0 .		0 and the			
С	If "Yes," enter name and address:					
	Name ▶					
	Address ▶					
16	Gaming manager information:					
	Name ▶					
	Gaming manager compensation ▶ \$0					
	Description of services provided ▶					
	☐ Director/officer ☐ Employee ☐ Independent contractor	-				
17	Mandatory distributions:					
''а	Is the organization required under state law to make charitable distributions from the	gam	ing proceeds to			
_	retain the state gaming license?	•	- ·	17a		
_b	Enter the amount of distributions required under state law distributed to other exempt of	organi	zations or spent			

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

42-1267125

Employer Identification number

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Linn-Mar School Foundation Part VI Section A Question 10 - Form 990 Review Process: Draft circulated to all board members for review before filing. Part VI Section B Question 12c: All board members are required to sign Conflict of Interest Policy Part VI Section B Question 15: Executive and Finance committees look at comp data and budget, then deliberate and decide. Part VI Section C Question 19: Foundation governing documents, conflict of interest policy, and financial statements are available on request at the Foundation's office.

chedule O (Form 990) 2008	Page 2
lame of the organization	Employer identification number
Linn-Mar School Foundation	42-1267125
•	
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